

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Anthony Gemma for Congress

Full Name (Last, First, Middle Initial)

**A. Anthony P. Gemma**

Mailing Address 83 Jenckes Hill Rd

City	State	Zip Code
Lincoln	RI	02865-4603

Purpose of Disbursement  
Advertising - Print

004

Category/  
Type

Candidate Name

Anthony P. Gemma

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: RI District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		22		2012

Amount of Each Disbursement this Period

5000.00

Transaction ID : D371623

\* In-Kind Received

Full Name (Last, First, Middle Initial)

**B. Anthony P. Gemma**

Mailing Address 83 Jenckes Hill Rd

City	State	Zip Code
Lincoln	RI	02865-4603

Purpose of Disbursement  
Meetings/Meals

001

Category/  
Type

Candidate Name

Anthony P. Gemma

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: RI District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		22		2012

Amount of Each Disbursement this Period

51.56

Transaction ID : D371624

\* In-Kind Received

Full Name (Last, First, Middle Initial)

**c. Anthony P. Gemma**

Mailing Address 83 Jenckes Hill Rd

City	State	Zip Code
Lincoln	RI	02865-4603

Purpose of Disbursement  
Event Display Materials

003

Category/  
Type

Candidate Name

Anthony P. Gemma

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: RI District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		22		2012

Amount of Each Disbursement this Period

184.59

Transaction ID : D371626

\* In-Kind Received

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5236.15